



DEPARTMENT OF PLANNING & BUILDING
BUILDING DIVISION
276 Fourth Avenue Chula Vista CA 91910
619-691-5272 619-585-5681 (FAX)

BUSINESS LICENSE APPLICATION

FORM 4570

BUSINESS LICENSE #:
OLD BUSINESS LICENSE #:

BUSINESS NAME: _____

BUSINESS ADDRESS: (NO P.O. BOXES) _____

CITY: _____ STATE: _____ ZIP: _____

MAILING ADDRESS: (IF DIFFERENT FROM BUSINESS ADDRESS) _____

CITY: _____ STATE: _____ ZIP: _____

BUSINESS PHONE: (____) _____ BUSINESS FAX: (____) _____

E-MAIL ADDRESS: _____

DESCRIBE YOUR BUSINESS: _____ NUMBER OF EMPLOYEES: _____

IF APPLICABLE, PROVIDE NUMBER OF: VENDING MACHINES _____ AMUSEMENT/VIDEO MACHINES _____
APT UNITS _____ HOTEL UNITS _____ MOTEL UNITS _____ MHP SPACES _____

OWNER NAME: _____ TITLE: _____

HOME ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

SOCIAL SECURITY #: _____ DRIVER'S LICENSE #: _____ STATE ISSUED: _____

HOME PHONE: (____) _____ CELL PHONE: (____) _____

CO-OWNER NAME: _____ TITLE: _____

HOME ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

SOCIAL SECURITY #: _____ DRIVER'S LICENSE #: _____ STATE ISSUED: _____

HOME PHONE: (____) _____ CELL PHONE: (____) _____

TYPE OF APPLICATION: ☐ NEW APPLICATION ☐ CHANGE OF OWNER ☐ CHANGE OF ADDRESS ☐ CHANGE OF DBA NAME

TYPE OF OWNERSHIP: ☐ CORPORATION ☐ LTD. LIABILITY CORP. ☐ PARTNERSHIP ☐ SOLE PROPRIETOR ☐ TRUST ☐ NON-PROFIT

STATE LICENSE NUMBER: _____ LICENSE TYPE: _____ EXPIRES: _____

RESALE #: _____ FEDERAL TAX ID #: _____ STATE TAX ID #: _____

TODAY'S DATE: _____ BUSINESS START IN CHULA VISTA DATE: _____ **CHECK IF HOME BASED BUSINESS** ☐

NOTICE TO ALL GENERAL AND SUB-CONTRACTORS

Contractor's Declaration

I hereby affirm under penalty of perjury that I am licensed under the provisions of Chapter 9 (commencing with Section 7000) of Div. 3 of the California Business and Professions Code. I currently have a California State Contractor's License in full force and effect.

STATE CONTRACTOR'S LICENSE #: _____ LICENSE CLASS: _____ EXPIRES: _____

CONTRACTOR'S SIGNATURE: _____ DATE: _____

EMERGENCY CONTACT

(The Emergency Contact Phone Number must be different from the Business Phone Number listed above.)

NAME: _____ PHONE: _____

ALARM COMPANY

BUSINESS NAME: _____ PHONE: _____

I declare under penalty of perjury that the above application is true and correct to the best of my knowledge. I certify that I will operate my business in accordance with all applicable Federal, State and City laws and regulations. I further understand that any false statements made above are grounds for denial or revocation of this business license.

SIGNATURE OF OWNER/REPRESENTATIVE: _____ TITLE: _____ DATE: _____

BUSINESS LICENSE TAX SCHEDULE

The Business License Tax Schedule is an aid in calculating Business License Taxes. Any error or omission does not excuse business owners of any responsibility or liability when establishing a business in the City of Chula Vista. Review the entire schedule to determine what taxes and fees apply to your business. If you have questions, contact a Business License Representative at 619-409-5436.

BUSINESS LICENSE TAX – BUSINESS LICENSE TAXES ARE PRORATED QUATERLY.							
BUSINESS LICENSE TAXES FOR BUSINESSES WITH 5 OR FEWER EMPLOYEES WITH A FIXED LOCATION IN CHULA VISTA.		1st Qtr	2nd Qtr	3rd Qtr	4th Qtr*	Employee Tax**	
		25.00	18.75	12.50	6.25	No tax for 5 or fewer.	
BUSINESS LICENSE TAXES FOR BUSINESSES WITH MORE THAN 5 EMPLOYEES WITH A FIXED LOCATION IN CHULA VISTA.		1st Qtr	2nd Qtr	3rd Qtr	4th Qtr*	Employee Tax**	
		52.50	39.38	26.25	13.13	\$6.50 per employee	
BUSINESS LICENSE TAXES FOR OUT-OF CITY BUSINESSES WITH NO FIXED LOCATION WITHIN THE CITY.		1st Qtr	2nd Qtr	3rd Qtr	4th Qtr*	Employee Tax**	
		52.50	39.38	26.25	13.13	\$6.50 per employee	
*Business license applications processed in the 4 th quarter of the current year pay taxes/fees for the 4 th quarter of the current year and for all of the following year.				**When counting employees DO NOT count Business Owner(s) as employees.			
PENALTY FEES - BUSINESS LICENSE TAXES ARE DUE IN ADVANCE.							
TAXES NOT PAID IN ADVANCE ARE ASSESSED A 10% PENALTY EACH MONTH UP TO 60%.							
ZONING FEE - REQUIRED FOR ALL NEW BUSINESSES WITH A FIXED LOCATION IN CHULA VISTA.							
Home-Based Business*	Commercial Address not open for business at time of application.			Commercial Address open before application date.			
\$25.00	\$30.00			\$45.00			
*A Home Occupation Permit Application must be submitted with the Business License Application for all home-based businesses. A Business License Application for a home-based business cannot be processed without a completed Home Occupation Permit Application.							
MISCELLANEOUS SPECIAL FEES							
Change of Classification	\$12.00	Change of Location	\$12.00	DBA Name Change	\$5.00	Duplicate License	\$5.00 per copy
SPECIAL BUSINESS CLASSIFICATIONS AND FEES							
THE FOLLOWING BUSINESS CLASSIFICATIONS REQUIRE A SEPARATE LICENSE IN ADDITION TO BUSINESS LICENSE TAXES ABOVE							
Amusement Arcades	\$150 per year		Live Entertainment**		\$200.00 per year		
Peddler/Solicitor* (Taxable property)	\$25.00 ea person, per yr (Not Prorated)		Peddler/Solicitor* (No taxable property)		\$75.00 ea person, per yr (Not Prorated)		
Vending Machine	\$15.00 per year		Dance/Dance Halls**		\$200.00 per year, per location		
THE FOLLOWING SPECIAL CLASSIFICATION FEES ARE IN PLACE OF ANY BUSINESS LICENSE TAXES SHOWN ABOVE.							
Amusement, Video, Weighing Machines	\$30.00 per year, per machine		Massage Parlor, Bathhse, Art Studio		\$250.00 per year		
Auto for Hire/Non-Emergency (sick, handicapped)	\$100.00 per yr, per vehicle		Out of City Delivery Drivers		\$25.00 year, per vehicle		
Billboards & Bill Posting (Advertising)	\$75.00 per year, per billboard		Pawnbroker**		\$200.00 per yr		
Bingo License*	\$50.00 per year		Pool & Billiard Hall		\$150.00 per year		
Card room (each table separate)*	Fee varies-Paid Quarterly		Pool Tables		\$30.00 per year		
Closing Out Sale* (\$15 for 30 day extension, 45 days max)	\$30.00 per location		Professional*** (In-City)		\$25.00 1 st yr, \$105 Renewal		
Dances for Youth** (Requires adult-sponsored group pmt)	\$15.00 per yr, \$5.00 per day		Professional*** (Out of City)		\$105.00 per year		
Ambulance Attendants/Drivers	\$5.00 per yr, per attendant		Promotional Event* (non-profit)		\$5.00 per event (3 days max)		
Amps/Other Devices for Announcing & Advertising	\$10.00 per day, per vehicle		Real Estate Broker		\$25.00 1 st yr, \$105 Renewal		
Handbill/Sample Distribution	\$25.00 per qtr; \$5.00 per day		Real Estate Salesperson		\$25.00 per person, per yr		
Jewelry sold at Public Auction**	\$100.00 per sale, per location		Special Event* (carnival, etc.)		\$250.00 per day		
Junk & Secondhand Dealers**	\$200.00 per yr, per location		Taxicab Business*		\$150.00 per year		
Manufacturer (5 or less employees)	\$25.00 1 st yr, \$52.50 Renewal		Taxicab Vehicle(s)*		\$25.00 per vehicle		
Manufacturer (More than 5 employees)	\$52.50 + \$3.25 per employee		Vending Vehicle		\$200.00 per year		
*Police Department approval required before payment of taxes/fees. **Police Department approval required before issuance of license.							
***Professional includes the following: Accountant, Anesthesiologist, Appraiser, Architect, Assayer, Attorney, Auditor, Bacteriologist, Chemist, Chiropractor, Consultant, Dentist, Engineer, Entomologist, Esthetician, Geologist, Holistic Health Practitioner, Hypnotherapist, Optician, Optometrist, Oculist; Osteopath, Pharmacist, Podiatrist, Physical Therapist, Physician, Psychiatrist, Physiotherapist, Psychologist, Real Estate Broker, Social Worker, Stock and Bond Broker, Surgeon, Surveyor, Taxidermist, Veterinarian							
DOWNTOWN IMPROVEMENT DISTRICT – BUSINESS OWNERS WITH A BUSINESS ADDRESS IN THE DOWNTOWN IMPROVEMENT DISTRICT (DID) ARE REQUIRED TO PAY THE DID ASSESSMENT. HOME BASED BUSINESSES IN THE DID DO NOT PAY THE DID ASSESSMENT. PENALTY ON THE DID ASSESSMENT IS 10% OF THE ASSESSMENT PLUS 1.5% PER MONTH UNTIL THE ASSESSMENT IS PAID.							
DOWNTOWN IMPROVEMENT DISTRICT ADDRESSES							
200-499 Third Ave.	301-349 Fourth Ave. (Odd #s)	300 – 309 G Street		265-399 F St.			
251-299 G St. (Odd #s)	280-298 G St. (Even #s)	400 – 450 Church Ave. (Even #s)		277 – 299 Alvarado St. (Odd #s)			
250 – 399 Center St.	200 – 399 Church Av.	300 – 349 Garrett Ave.		291-344 Davidson St.			
301 – 399 Del Mar Av. (Odd #s)	201-299 Garrett Ave. (Odd #s)	300 – 314 Park Way		303 H Street - Gateway			
200 – 399 Landis Ave.	250 – 399 Madrona St.	300 – 314 Park Way					
DOWNTOWN IMPROVEMENT DISTRICT ASSESSMENT							
Professionals*** - \$100.00	All Other Business Classifications - \$50.00 + \$6.00 per employee - (No charge for 1 st employee; Maximum DID assessment - \$100)						
NEW BUSINESS INFO: COMMUNITY DEVELOPMENT (619) 691-5047 SOUTHWESTERN COLLEGE (619) 482-6394 CHAMBER OF COMMERCE (619) 420-6602							
EMPLOYEE IDENTIFICATION NUMBER: INTERNAL REVENUE SERVICE - 800-829-3676			FICTITIOUS NAME BUREAU: 619-237-0502 OR 619-498-2200				